

CERTIFICATE OF MAILING
37 CFR 1.8

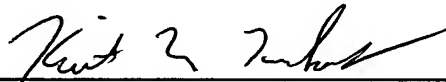
I hereby certify that this correspondence is being deposited on 11/13, 2003 with the United States Postal Service as First-Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

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No item of information contained in the Supplemental Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification after making reasonable inquiry, no item of information contained in the Supplemental Information Disclosure Statement was known to any individual designated in § 1.56(c) more than three months prior to the filing of the Supplemental Information Disclosure Statement.

If the sum of \$180.00 is due under 37 CFR § 1.17(p) pursuant to § 1.97, the Commissioner is hereby authorized to charge this fee, and any other fee necessary to make this submission timely, to the Deposit Account No. 20-0782/AMAT/3771.Y1/KMT.

Respectfully submitted,



Keith M. Tackett
Registration No. 32,008
MOSER, PATTERSON & SHERIDAN, L.L.P.
3040 Post Oak Blvd., Suite 1500
Houston, TX 77056
Telephone: (713) 623-4844
Facsimile: (713) 623-4846
Attorney for Applicant(s)

U.S. Department of Commerce, Patent and Trademark Office (PTO Form 1449 modified)		Docket No. AMAT/3771.Y1/DSM/ LOW K/JW	Serial No. 10/091,699
SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Applicant Mandal, et al.	Confirmation No. 7928
(Use several sheets if necessary)		Filing Date March 4, 2002	Group 2814
Examiner Steven H. Rao			

U.S. Patent Documents

*Examiner Initial		Document Number	Issue Date	Applicant(s) Name	Class	Subclass	Filing Date If Appropriate
	A1	2003/0198742	10/23/2003	Vrtis, et al.	427	255.28	05/17/2002
	A2						
	A3						
	A4						
	A5						
	A6						
	A7						
	A8						
	A9						
	A10						
	A11						
	A12						
	A13						

Foreign Patent Documents

*Examiner Initial		Document Number	Date	Country	Class	Subclass	Translation	
							YES	NO
	B1						<input type="checkbox"/>	<input type="checkbox"/>
	B2						<input type="checkbox"/>	<input type="checkbox"/>
	B3						<input type="checkbox"/>	<input type="checkbox"/>
	B4						<input type="checkbox"/>	<input type="checkbox"/>
	B5						<input type="checkbox"/>	<input type="checkbox"/>

OTHER ART

*Examiner Initial		Including Author, Title, Date, Pertinent Pages, Etc.
	C1	
	C2	

Examiner

Date Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with your communication to applicant.